DEPARTMENT FOR SOCIAL INSURANCE
"An Equal Opportunity Employer M/F/D"

KASES Network Memo No. 30

TO: Staff, Division of Child Support Enforcement
All IV-D Agents

FROM: Steven L. Blank, Director
Division of Child Support Enforcement

DATE: July 26, 1994

SUBJECT: Revised KAMES Integrated System Codes List

For your information and use, attached is a copy of the Kentucky Automated Management and Eligibility System (KAMES) Integrated Codes List. The KAMES Integrated System Codes List is to be added as an appendix to the Kentucky Automated Support and Enforcement System (KASES) Handbook.

The information in this memorandum is to be cross referenced with KASES Network Memo No. 21 dated August 26, 1993, and KASES Network Memo No. 23 dated October 26, 1993.

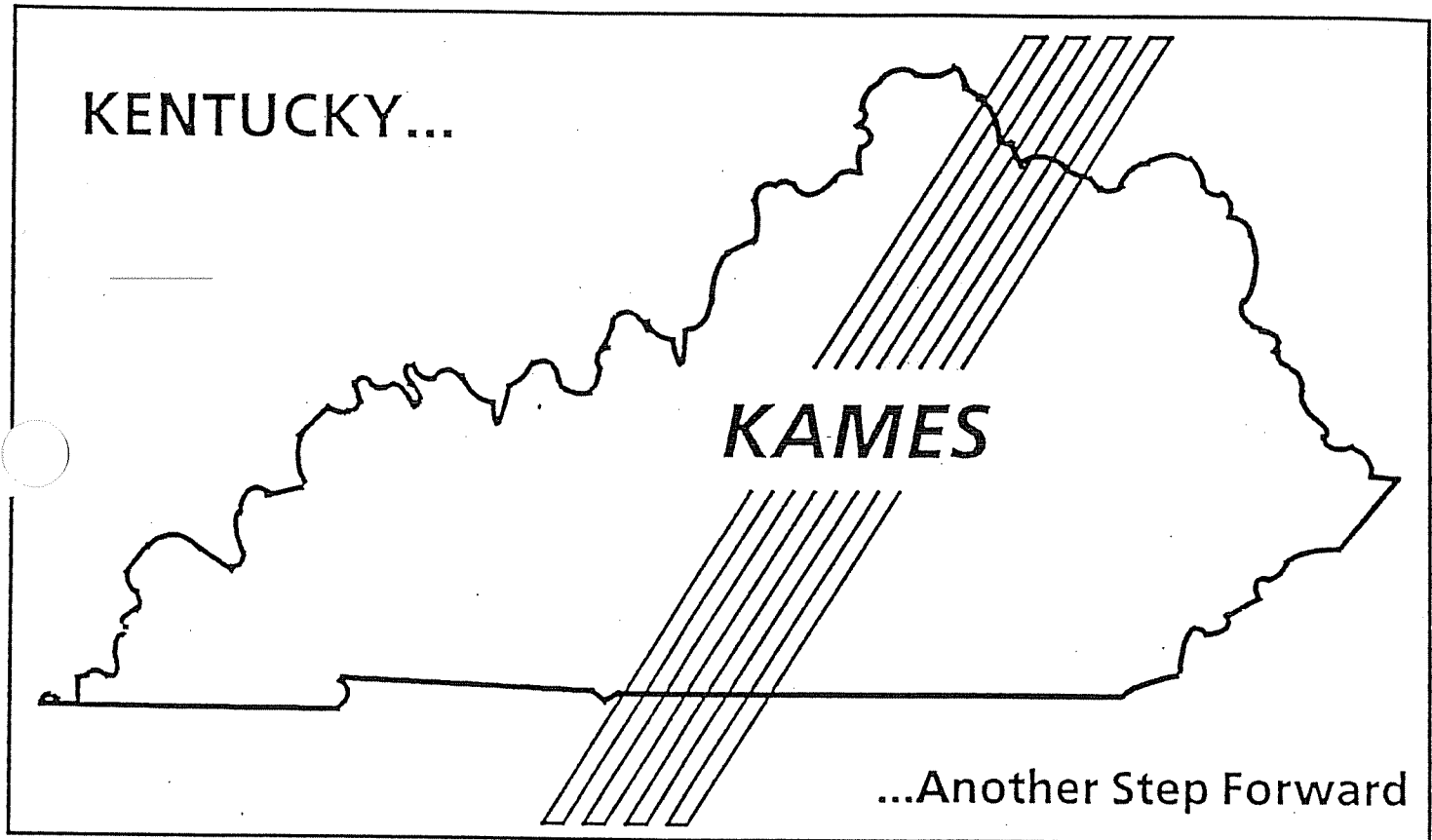**JEFFERSON COUNTY DCSE AND CONTRACTING OFFICIAL STAFF ARE TO SAVE AND FILE THIS MEMO FOR FUTURE REFERENCE.**

Retention: Until Superseded

Inquiries: DCSE Staff - Supervisors
IV-D Agents - Compliance Analysts

KAMES

INTEGRATED SYSTEM

KENTUCKY...

KAMES

...Another Step Forward

CODES

LIST

EFFECTIVE DATE

JUNE 1, 1994

KAMES INTEGRATION CODES LIST

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KAMES INTEGRATION CODES

This document is designed to be used by system programming staff as well as field staff. System references for programming staff will be contained through out the document entitled "Programming Note".

AGENCY CONTACT MODE:
Programming Note: 160 - this entity represents the table of methods in which the client could have made contact with the agency to request assistance.

1	Client
2	Mail
3	Other

AGENCY CONTACT REASON CODES:
Programming Note: 161 - This entity represents the table of reasons for a client contact with the agency to request assistance.

IM	FS	
A	1	Applications
B	2	Recertification
C		Program Transfers
D	4	Verification Income / Deduction
E	5	Address Change
F	6	(not used)
G	7	Report Change
H	8	Payments
I	9	(not used)
J	0	Other

ALIEN ENTRY STATUS CODES:
Programming Note: 362 - This entity contains all of the possible alien entry status types. HRKIPA08 / HRKIPD0A.

A1   I-94 with letter codes A-L; I-95A; I-185; I-186; and SW-434.

Ineligible for all Income Maintenance services.

A2   I-94 annotated with the words "refugee, asylee, parolee, conditional entrants, Cuban /Haitian entrant, Amerasian immigrants (letter coded AM-1, AM-2, or AM-3), humanitarian, Persian gulf evacuee, hostage (PRUCOL)"; or previously held these statuses: and I-551 for Amerasian immigrants (letter coded AM-6, AM-7, and AM-8).

Eligible for all regular IM services without the mandatory three year waiting period, plus the Refugee Assistance program codes RR and RM.

A3   I-551, I-151, AR-3, AR-3a and sponsored by a private or public agency.

Ineligible for all IM services for three years after entering the country.

A4   I-551, I-151, AR-3, AR-3a and sponsored by a private or public agency, but DSI has determined that the sponsor relationship no longer exists or has become unable to meet the individuals needs.

Eligible for assistance without reference to the three year waiting period.

A5   I-551, I-151, AR-3, and AR-3a and a dependent child of a sponsor; or an alien sponsored by an individual.

Eligible for all regular IM services without reference to the mandatory three year waiting period. The income and resources of the sponsor are counted as appropriate.

A6   Legalized (spouses and unmarried children); I-688; I-551 with a registration number in the 90 million series and on the reverse side of the form, the fourth line will read "TEMP RES ADJ DATE MM-DD-YY".

AFDC -ineligible for five years from the date of gaining legalized status.

MA and child less than 18 years old-eligible effective date legal status granted.

MA and aged, blind or disabled individual-eligible effective date legal status granted.

MA and pregnant-eligible during pregnancy effective date legal status granted.

MA, between the ages of 18 and 65 and possessing an emergency medical condition-eligible for time-limited emergency medical services.

A7   No INS documentation, no status verified by the INS or SAVE. Exception: Aliens in Temporary Protected Status (TPS).

AFDC - ineligible.

MA and possessing an emergency medical condition-eligible for time-limited emergency medical services. Pregnant individuals treated under this provision are only eligible for emergency delivery services and do not have prenatal or postpartum eligibility. Applies to L, N, Y, I, P, J, K, or M cases.

ALIEN IN SATISFACTORY STATUS:
Programming Note: HRKIMAOF / HRKIMDOF

Y   Yes
N   No
R   Refused to Answer

2

ALIEN REGISTRATION ELIGIBLE CODES:

Programming Note: 363 - This entity contains all of the possible alien
eligibility / verification source codes which may pertain to an alien.
HRKIMAOF / HRKIMDOF

AB   Aged, blind, disabled alien
CH   Cuban / Haitian
SW   Special Agricultural worker
IN   Form I-151, I-551
RP   Re-entry permit
I9   I-94 annotated with section 207, 208, 212(d), 243(h), 203(a)(7) issued
    prior to 4/1/80. Terms refugee, parolee, paroled, or asylum.
G6   G-641 with evidence of lawful admission for permanent residence or
    parole for humanitarian reasons.
CR   Cooperation from INS that alien is classified pursuant to the following
    section of the Immigration and Nationality Act: 101(a)(15), 101(m)(20),
    207, 208, 212(d)(5), 243, 249.
CT   Court evidence deportation withheld pursuant to section 243(h)
    Immigration and Nationality Act.

ALIEN REGISTRATION INELIGIBLE CODES:

Programming Note: 363 - This entity contains all of the possible alien
eligibility / verification source codes which may pertain to an alien.
HRKIMAOF / HRKIMDOF.

AL   I-94 with letters A-L, OOE, Voluntary departure.
TL   All other temporary lawful resident aliens
99   Other

APPOINTMENT INTERVIEW CODES:

Programming Note: 098-Reasons why an appointment has been scheduled.
Type of Appointment / Interview Code. HRKIMP02 / HRKIMP01

AC   Agency Conference
AP   Application
CD   Claim Discussion
RC   Recertification
ST   Staff Meeting
CH   Change
MR   MMR
FJ   Follow-up JOBS Interview (JOBS 100), IM only.
IJ   Initial JOBS Appointment (JOBS 100), IM only.
VJ   Volunteer Second Appt. (JOBS 102), IM only.
LE   Leave
HR   Change Recertification
NS   No Show

Notice Indicator Codes:
    1   Printed Locally
    ___   Blank-Notice sent in Batch

Cancellation Code:
    C   Cancel Appointment.

APPROVAL REASON CODE:
Programmer Note: AAQ

AFDC Applications:
100	Has not previously received AFDC (New Case)
200	Re-approval within 10 days of discontinuance (reopened case)
210	PA-125 in case record and received AFDC within 90 days prior to acceptance of this approval document (reopened case)
215	No PA-125 required and received AFDC within 90 days prior to acceptance of this approval document (reopened case)
220	Previously received AFDC (reopened case inactive for more than 90 days)
310	Re-approval: PA-125 in case record and received AFDC within 90 days prior to acceptance of this document (reopened case)
315	Re-approval: No PA-125 required and received AFDC within 90 days prior to acceptance of this document (reopened case)
320	Re-approval: Previously received AFDC (reopened case, inactive for more than 90 days)

AFDC or State Supplementation - Program Transfers:
100	Has not previously received assistance in this category (new case)
210	AFDC ONLY. PA-125 in case record and received AFDC within 90 days prior to acceptance of approval document (reopened AFDC case)
215	AFDC ONLY. No PA-125 in case record and received AFDC within 90 days prior to acceptance of approval document (reopened case)
220	Has previously received assistance in this category (reopened case)
310	AFDC ONLY. Re-approval: PA-125 in case record and received AFDC within 90 days prior to acceptance of this document (reopened case)
315	AFDC ONLY. Re-approval: No PA-125 in case record and received AFDC within 90 days prior to acceptance of approval document (reopened case)
320	AFDC ONLY. Re-approval: Previously received AFDC (reopened case, inactive for more than 90 days)

State Supplementation - Applications:
100	Has not previously received State Supplementation (new case)
200	Re-approved within 10 days of discontinuance (reopened case)
220	Has previously received State Supplementation (reopened case)

AVERAGE HOURS PER WEEK CODE:
Programmers Note: ABR. HRKIPA03.

1	35 or more hours
2	23 to 34.9 hours
3	1 to 22.9 hours
4	not working

BATCH MATCH CODES:

Programming Note: The following codes represent various types of income that should be considered by the worker in resolving Batch Match Hits.

BENDEX EARNED INCOME TYPE CODES:

Programming Note: 200 - This entity holds the codes that identify income reported by the BEERS tape.

AG	Agricultural wages have been reported
PE	Annual report of pension income
SE	Self-employment earnings have been reported
00	Annual report of earnings (two zero's)
03	First quarter report of earnings
06	Second quarter report of earnings
09	Third quarter report of earnings
12	Fourth quarter report of earnings

BENDEX UNEARNED INCOME TYPE CODES:

Programming Note: 352 - This entity contains all of the possible unearned income codes used by BENDEX.

A	Social Security
B	Black Lung
C	VA Compensation
D	Railroad Retirement
E	VA Pension
L	Military Pension
M	Civil Service Pension
N	Child Support
O	Other
P	Employment Related Pensions
Q	Workman's Compensation

COMPUTER MATCH INCOME TYPE CODES:

Programming Note: 354 - This entity contains all of the possible computer match (IRS) income type codes.

01	Gross Winnings
03	Interest
04	Dividends
05	Patronage Dividends
06	Non-patronage Dividends
07	Per-unit Retain Allocations
08	Redemption of Non-qualified and Retain Allocations
12	Unemployment Compensation
13	State / Local Tax Refund
14	Discharge of Indebtedness
16	Agricultural Subsidies
18	Other Pension Distribution
19	Cash Liquidation Distribution
20	Non-cash Liquidation Distribution
23	Additional Winnings from Identical Wager
24	Savings Bonds
25	Interest Forfeitures

26	Substitute Payments
27	Stocks and Bonds
29	Aggregate Profit and Loss
30	Profit and Loss realized in 1991
33	Rents
34	Royalties
35	Prizes and Awards
37	Gross Pension Distributions
39	Original Issue Discount
41	Real Estate Proceeds
42	Unrealized Appreciation in Securities
43	Other Taxable Income
47	Debt Outstanding
48	Debt Satisfied
49	Fair Market Value

ON-LINE HITS:
Programming Note: HRKIMA03.

Y	Yes
N	No
U	Unresolved

BENEFIT STATUS CODES:
Programming Note: HRKIPI18 / KIPC223M / HRKIPI20 / KIPC227M.

SP	Stop Payment
CA	Cancelled
RC	Returned

BENEFIT TYPE:

1	Regular
2	Special Circumstance Grant
3	Special Circumstance MAID only
4	Restoration
5	Replacement
6	Supplemental
7	Retro Payment
9	Lockin MAID only
0	Pro-rated.

CASE HISTORY INQUIRY REASON CODES:
Programming Note: 109 - Reasons why a change has been made to a case.

A	Application
R	Recertification
M	Change in monthly reporting
N	MR change no change
I	Interim Change
C	Client request
H	Hearing
S	Reinstatement
W	Worker error

P   Recert appointment
D   MR Discontinuance

CASE HISTORY REPORT SELECTION CODES:
Programming Note: HRKIMU62.

1   Entire history as of selected date
2   One segment of selected date
3   All case segments within time period
4   All of one segment type within time period

.CASE STATUS CODES:
Programming Note: 012 - This entity describes one of the number of valid states that are applicable to Food Stamps or Income Maintenance Cases.

A   Active
D   Denied
I   Discontinued
P   Pended
S   Suspended
T   Pending Program Transfer

CHILD SUPPORT ACTION CODES:
Programming Notes: 261 - This is a valid child support action that follows a good cause determination HRKIPAOP / HRKIPD21.

Good Cause Exists, SR eligible
01   Child Support Not Recommended
02   Child Support Recommended

No Good Cause, SR Ineligible, Referred for Child Support Action
03   Applicants Only - Decision made before determined eligible for AFDC.
04   Applicants only - Decision made after determined eligible for AFDC.
05   Active Cases - (Recertification, interviews) Inapplicable
09   Inapplicable; No claim filed or claim withdrawn, or AFDC case denied.

CHILD SUPPORT (DCSE) GOOD CAUSE CLAIM CODES:
Programming Note: HRKIPAOP / KITC360M

1   Yes; Claim filed
2   No; Claim not filed, Specified Relative excluded from budget.

CLAIM ACTION BASIS CODES:

Programming Note: 154 - This entity represents the basis for a claim against a case.

01	# Children living with another family
02	Child does not live with Specified Relative (IM only)
03	Child's parents not absent (IM only)
04	Lives in another County
05	Earned Income
06	Unearned income
07	Child Support payments
08	Resources
09	Household (#)
10	Duplicate case
11	Agency error
14	Refugee Ineligibility
15	Other Technical ineligibility claim selection

CLAIM CATEGORY CODES:

Programming Note: 124 - This entity is the table of all particular categories that a claim against a household can fall into. HRKIPI25 / HRKIFI06

1	Administrative error
2	Inadvertent household error (FS only)
3	Intentional program violation (FS only)
4	AFDC fraud (IM only)
5	AFDC non-fraud (IM only)

CLAIM RECOUPMENT TYPE CODES:

CP	Cash Payment
RP	Recoupment Payment

COUPON EXTRACTION CODES:

Programming Note: 093 - Method of dispersing Food Stamp Coupons to a specific client. HRKIMD01 / HRKIFI03 / HRKIFC05

I	In direct mail counties, this denotes on-going local office pickup. In direct delivery counties, this denotes on-going mail issuance.
Y	Same as above except denotes one time only.
C	Certified mail counties.
N	Normal issuance.
J	Change in issuance site in either Fayette or Jefferson County.
S	Same as "J" only different issuance sites involved.
H	Homeless, issue all or part of allotment in $1 coupons.
P	Same as "H" but local office pick up. Use only in direct mail counties.
B	Certified mail counties above $199 (limited to certain counties).

DCSR EVENT CODES:

Programming Note: 214 - These are the types of events recorded on the Case Event Calendar and/or the Daily Case Status Report data bases. CEC only events are indicated by an asterisk (*).

AC	SSI Alert Cases Review
HC	SSI Alert Cases Nearing Time Limit

AR*	Auto Recalculation

CA	Pending Applications
HA	Applications Nearing Time Limit
MA	Pending Applications Supervisor

CB	Pending Recerts
HB	Recerts Nearing Time Limit
MB	Pending Recerts Supervisor

CD	Pending Case Changes
HD	Monthly Reporting Nearing Time Limit
MD	Pending Monthly Reporting Supervisor

CE	Pending Case Changes
HE	Case Changes Nearing Time Limit
ME	Pending Case Changes Supervisor

CF	Pending Non-deliverable Mail
HF	Unresolved Non-deliverable Mail Nearing Time Limit

CG	Expiring Enumeration
HG	Expiring Enumeration Nearing Time Limit

CH	Returned Coupons
HH	Unresolved Returned Coupons Nearing Time Limit

CI	Notice of Returned Checks
HI	Spot Checks Nearing Time Limit
MI	Pending Spot Checks Supervisor

CN	Notice of Returned Checks
HN	Notice of Returned Checks Nearing Time Limit

DA	Discontinuances

ER	KASES DCSE Escrow Review
HR	DCSE Escrow Review Nearing Time Limit

FA	Cases Requiring Recert

FD*	FS Timely Disposition

IL	Batch Match Exception List
HL	Batch Match Exception List Nearing Time Limit

JD*   JKM - Blind / Disabled

MJ   Pending Disqualifications

MU*   End of Time Limit - MA

PV*   Assignment of Providers

RR*   Refugee Assistance Receipt

RS   Supervisor Sample of Cases to Review

33*   30 1/3 Time Counter

AA   Agency Action (required)

DCSR EXCEPTION LISTING CODES:
Programming Note: 355 - This entity contains all of the possible instances of IEVS match categories.

SDX   SDX File
SSN   Duplicate SSN's on SDX File
UI   Unemployment Benefits
CM   Computer Matches (IRS)
WAGES   Wage Record
BXE   Bendex File Earned Income
BXU   Bendex File Unearned income
AFDC   AFDC
EXU   More than one type of unearned income on the SDX File

DCSR MESSAGES:
Programming Note: 294 - These are the various reason codes and messages (upper case) and descriptions (lower case).

01   MR COMPLETE BUT NOT WORKED
        Pending MMR List

06   EXPIRING PSEUDO NUMBER
        Internal system message

07   RECERT - NO SHOW FOR INTERVIEW
        Auto disc listing

08   RECERT - ADDL INFO NOT RECEIVED
        Auto disc listing

09   10TH DAY ADVERSE ACTION NOTICE
        Auto disc listing

1B   MR FORM NOT APPLIED
        Auto disc listing

1C NEEDS APRVL - PROB. WKR -MMV
      For appl or recert only (FS)

1D NEEDS APRVL -PROB. WKR - MOV
      For appl or recert only (FS)

10 MR FORM WAS NOT RETURNED
      Auto disc listing

11 AWAITING SUP APRVL - PROB. WORKER
      For appl or recert only (IM)

12 INSUFF WAGE VERIFICATION
      For appl or recert only (IM)

13 AWAITING SUP APRVL - SPEC CIRCUMS
      Case Change message

14 AWAITING APRVL - SSN CHANGE
      Case Change message

16 AWAITING APRVL GEN INFO SEG
      Case Change message

17 AWAITING APRVL - HOME ADDR SEG
      Case Change message

18 AWAITING APRVL - MAIL ADDR SEG
      Case Change message

19 AWAITING APRVL - VEHICLE SEG
      Case Change message

1E AWAITING APRVL - INT. PARTY / AR
      Case Change message

2B UNTIMELY RECERT - MISSING VERIF
      Message for untimely recert w/missing verif

2C AWAITING APRVL. SUPPLEMENTAL

2D AWAITING APRVL. RESTORATION

2E AWAITING APRVL. REPLACEMENT

2F SHILTER / UTILITY VERIF.
      Case Change message

20 UTILITY VERIFICATION
      Case Change message

21 MISSING INFORMATION
      Incomplete appl / recert

22 MISSING VERIFICATION
   Complete appl /recert w/missing verif

23 OUTSTANDING ADDRESS MATCHES
   Complete appl /recert w/unresolved address match

24 AWAITING APRVL - FARM SEGMENT
   Case Change message

25 VERIFICATION OF FARM SEG
   Case Change message

26 VERIFICATION OF VEHICLE
   Case Change message

27 VERIFICATION OF SELF -EMPLOY
   Case Change message

28 VERIFY CASE GENERAL INFO
   Case Change message

29 VERIFY - INT. PARTY / AR
   Case Change message

3A AWAITING APPRVL - KENPAC
   Case Change message

30 VERIFICATION OF HOME ADDRESS
   Case Change message

31 NEGATIVE ACTION EXPIRING

32 AWAITING APRVL - INSUF WAGE VER
   Appl / recert only

33 NEED APRVL - UNEARNED INC. = CS
   Appl / recert only

35 AWAITING APRVL - SELF EMPL SEG
   Case Change - probationary worker

36 AWAITING APRVL - SHELTER / UTILITY
   Case Change - probationary worker

37 AWAITING APRVL OF REINSTATEMENT
   Case Change - probationary worker

38 ADVERSE ACTION GENERAL INFO
   Case Change message

39 ADVERSE ACTION - HOME ADDRESS
   Case Change message

40   ADVERSE ACTION - ROOM / BRD
Case Change message

41   ADVERSE ACTION - VEHICLE SEG
Case Change message

42   ADVERSE ACTION - FARM SEGMENT
Case Change message

43   ADVERSE ACTION - SELF EMPL. SEG
Case Change message

44   ADVERSE ACTION - SHELTER / UTILITY
Case Change message

45   ADVERSE ACTION - TO DISC.
Case Change message

46   (SSN NO.) VERIFY MEM GEN INFO.
Case Change - probationary worker

47   (SSN NO.) VERIFY UNEARNED INC.
Case Change - probationary worker

48   (SSN NO.) VERIFY EARNED INC.
Case Change - probationary worker

49   (SSN NO.) VERIFY MEDICAL
Case Change - probationary worker

50   (SSN NO.) VERIFY RESOURCES
Case Change message

51   (SSN NO.) NEED VERIF. MBR ADD
Case Change message

52   (SSN NO.) APRVL MEM GEN INFO
Case Change - member SSN

53   (SSN NO.) APRVL UNEARNED INC.
Case Change - member SSN

54   (SSN NO.) APRVL EARNED INC.
Case Change - member SSN

55   (SSN NO.) APRVL MEDICAL SEG.
Case Change - member SSN

56   (SSN NO.) APRVL RESOURCES SEG:
Case Change - member SSN

57   (SSN NO.) APRVL MEM ADD
Case Change - member SSN

58	(SSN NO.) ADVRS ACT. GEN. INFO Case Change - member SSN
59	(SSN NO.)ADVRS UNEARNED INC. Case Change - member SSN
6B	WKR. REQUEST TO PEND 30 + DAYS Appl / recert
6C	POTENTIAL CE-PEND OVER 30 DAYS Appl only
6D	REQUEST TO PEND OVER 10 DAYS
60	(SSN NO.) ADVERSE - EARNED INC. Case Change - member SSN
61	(SSN NO.) ADVERSE - MEDICAL EXP. Case Change - member SSN
62	(SSN NO.) ADVERSE - RESOURCES Cash Change - member SSN
63	(SSN NO.) ADVERSE -MEM ADD Case Change - member SSN
64	AWAITING APPROVAL OF DISC. Case Change message
65	PENDING APPEAL - GEN INFO SEG Case Change message
66	PENDING APPEAL - HOME ADDR SEG Case Change message
68	PENDING APPEAL - VEHICLE SEG Case Change message
69	PENDING APPEAL - FARM SEGMENT Case Change message
7A	NO AGENCY CONTACT FOUND Appl only
7B	SUP APPROVAL - BATCH MATCH Case Change message
7C	NO AGENCY CONTACT FOUND - MMV Application only
7D	NO AGENCY CONTACT FOUND - MOV Application only

7E PENDING DUE TO SUPR OVERRIDE
    App. Recert, Prog. Transfer, Case Change

70 PENDING APPEAL - SELF EMPL - SEG
    Case Change message

71 PENDING APPEAL - UTILITY SEG
    Case Change message

73 PENDING APPEAL - MEM GEN INFO
    Case Change message

74 PENDING APPEAL - UNEARNED INC.
    Case Change message

75 PENDING APPEAL - EARNED INC.
    Case Change message

76 PENDING APPEAL - MEDICAL SEG
    Case Change message

77 PENDING APPEAL - RESOURCES SEG
    Case Change message

78 PENDING APPEAL - MEMBER ADD
    Case Change message

79 PENDING APPEAL - DISCONTINUANCE
    Case Change message

9F REVIEW PROBAT. WRK. SSN CHG.
    Probationary worker - pend for supervisor review

9G MEM DISQUAL -TRANSFER OF RES
    Probationary worker - pend for supervisor review

9I MEM DISQUAL - VOLUNTARY QUIT
    Probationary worker - pend for supervisor review

9J MEM DISQUAL -QC COOPERATION
    Probationary worker - pend for supervisor review

9K CALENDAR FULL - NO APPT MADE
    Recert appt not scheduled

9M MEM DISQUAL -IPV OCCURRENCE
    Probationary worker - pend for supervisor review

9N AWAITING APRVL - BACKDATED APP
    Application

91	AWAITING APRVL - REPLACEMENT
92	OUTSTANDING MEMBER MATCH
	Case Change member add
93	INCOMPLETE APPLICATION / RECERT
	Used only when 1st 4 screens of appl or 1st 3 screens of timely recert are completed
94	AWAITING APRVL - RECERT ADDR CHG
	Application
95	INCOMPLETE UNTIMELY RECERT
	Used when 1st 3 screens of untimely recerts are completed
96	VERIFY ROOMER / BOARDER INFO
	Case Change FS / IM
100	VERIFY ENTRY DATE IN ABUSE CENTER OR SAFE SHELTER
	Case Change FS / IM

DENIAL / DISCONTINUANCE CODES (worker entered):

Programming Note: 162 - This entity represents the table of a particular reason that a case has been declared to be in a particular case disposition status. HRKIFC11 / HKIMD19 / HRKIPC23

1   Non-cooperation of client
2   Client's request - written
3   Client's request - unwritten
4   Non-cooperation IEVS match
5   Only household member has died
6   Moved out of state
7   Moved out of the county
8   Transfer to non-KAMES county / other system

DEPRIVATION CODES:

Programming Note: 037 - This entity describes one of several types of deprivation that may be suffered by a child involved in an Income Maintenance case. HRKIPAOF / HRKIPAOG / HRKIPD07.

11   Divorce
12   Desertion
13   Birth Out of Wedlock
14   Legal Separation
15   Marriage Annulment
18   Forced Separation
21   Hospitalization
22   Incarceration
23   Deportation
24   Single Parent Adoption
30   Incapacity
40   Death
50   Unemployment

DISABILITY BENEFITS RECEIVED:

Programming Note: 211 - This is an instance of a disability benefit that a person may receive which will assist in the field determination of incapacity / disability. HRKIPAOH / HRKIPD08.

00	None
01	SSI (State Supplemental Insurance)
02	RSDI (Social Security)
03	Black Lung
04	Railroad Retirement
05	100% VA Disability

DISQUALIFICATION REASON CODES (FS - worker entered / pending):

Programming Note: 094 - Source for the specific reason a person has been disqualified.

301	Transfer of Resources
314	ETP Assessment Interview
315	ETP Requirement
316	Comparable JOBS Sanction
319	Non-cooperation with QC
397	Intentional Program Violation
330	Voluntary Quit

DISQUALIFICATION REASON CODES (IM - worker entered / pending):

Programming Note: AAF - Source for the specific reason a person has been disqualified.

343	Non-recurring Lump Sum Income
389	Cooperation with DCSE
398	Refugee Non-cooperation
401	Transfer of Resources (C,W)
414	Transfer of Resources (LTC / HCBS)
416	Non-cooperation with JOBS

DOCUMENT TYPE (LTC CASES):

01	Confirmation Notice (1 NF and 8 ICF /MR / DD)
02	DMS Letter of Approval (2 - HCBS; 6 - Model Waiver I; 7 - Model Waiver II; 11 - Adult Day Care)
03	MAP - 374 (3 - Hospice Non-institutionalized; 4 - Hospice NF)
04	MAP - 24 (1 - NF)
05	DMR - 001 (5 - AIS / MR)
09	L 02 (9 - Mental Health / Psychiatric Facility; 10 - PRTF; 12 - IMD)

EXCLUDED INCOME CODES:

Programming Note: 156 - This entity contains a listing of all possible sources of excluded income that a person could have in a case. HRKIMAOH / HRKIMDOE

QR	Gift $30 per Quarter or less (IM only)
IK	In-kind Income
VP	Vendor Payments
TH	Third Party Payments

CS	Child Support to DCSE
RB	Reimbursements
IR	Irregular Income (FS only) - (Re. FSOM, Vol II, manual section 5210L)
AT	Allocated Tips
TU	Tuition
LO	Loans
JT	JTPA
EC	Child's Earnings
OT	Other
CE	Cost of Self-employment
TR	Transportation
EI	Earned Income Tax Credit
DE	Defra (IM only)
AO	Agent Orange Settlement Fund
FC	Foster Care Payment
SS	Supportive Services
DR	Disaster relief Act of 1974
SM	Student Monies for Dependent Care Expense
AC	Annual Clothing Allowance
LS	Non-recurring Lump Sum
OA	SCSEP
IA	Interest accruing to burial reserves (IM only)

FOSTER CARE PROCESSING CODES:
Programming Note: AAM - KIPX050 / KIPX051

S4	IV-E eligible that is not reimbursable
S5	VI-E reimbursable children
S6	Ky children in other states
S7	Children placed in KY from other states
S8	IV-E Group Home children

FOSTER CARE RESPONSIBLE AGENCY CODES:
Programming Note: AAI

01	Department for Social Services
02	Department for Human Services
03	Daviess County Welfare League
04	Fayette County Children's Bureau
05	Private non-profit Institution
06	Subsidized Adoption

FOSTER CARE TYPE CODES:
Programming Note: 228 - HRKIPAOE

SA	Subsidized Adoption
FC	Foster Care

FS MMR INCOMPLETE REASON CODES:
Programming Note: 122 - This entity holds the MMR incomplete reason codes which could be applied to a case. HRKIFD02.

01I	Question 01 was incomplete.
02I	Question 02 was incomplete.

03I	Question 03 was incomplete.
04I	Question 04 was incomplete.
05I	Question 05 was incomplete.
06I	Question 06 was incomplete.
07I	Question 07 was incomplete.
08I	Question 08 was incomplete.
09I	Question 09 was incomplete.
10I	Question 10 was incomplete.
11I	Question 11 was incomplete.
12I	Question 12 was incomplete.
13I	Question 13 was incomplete.
14I	Question 14 was incomplete.
15I	Question 15 was incomplete.
16I	Question 16 was incomplete.
01V	Residence verification was not provided for address change.
02V	Verification of rent or mortgage payments which changed was not provided.
03V	Utility expenses.
04V	Statement from any person outside your household who gave you money to pay any part of your rent or mortgage and/or utilities during the report month.
07V	Verification of how many people live in your home
08V	Income from employment.
09V	Dependent care expenses.
10V	Unearned income has changed or is new.
11V	Bank statement or other records to verify checking account, savings account and / or other liquid resources.
ACV	Alien status or citizenship for new household members.
MEV	Medical expenses.
SNV	Social security number for new household members.
STV	Statement from an institution of higher education verifying enrollment of at least half time enrollment and / or receipt of work study.
OIV	Other information is needed in order to process your monthly report. Please contact your caseworker immediately.
DTM	Your monthly report must be dated.
SGM	your monthly report must be signed.
WRV	Work Registration for a household member.

FS PROGRAM CATEGORY CODES:
Programming Note: 014

NA	Non assistance FS
PA	Public Assistance FS

IEVS CODES:
Programming Note: 095 - Source that ties a specific case action as being taken to the information received from an IEVS match. HRKIFC11 / HRKIMD19 / HRKIPC20 / HRKIPC23.

BE	IEVS BENDEX Earned Income Match
BU	IEVS BENDEX Unearned income Match
CM	Computer Match (IRS)
SW	IEVS SWICA Match
UI	IEVS UI Match

SD   IEVS SDX Match
NA   Not due to IEVS Match

IM ID CODES:

Programming Note: 232 - Relates to individuals coded as either members or non-members. HRKIMA04 / HRKIMDOE / HRKIMDO4.

Program Codes C, W, L, N, Y and I only:

"M" Member Status:

M - 02	Deemed eligible newborn (Code is applicable for both AFDC and MA only children, under the age of 1, who meet the MA criteria for being deemed eligible. This code will be changed to M-05 by the system when the child is 1 yr. old if all technical and financial eligibility requirements are met.)
M - 03	Specified Relative (For I and Y cases, the SR is coded as R-57, if not included as a pregnant woman)
M - 04	Second Parent (For I and Y cases, the second parent is coded and considered as R - 58; i.e. they are counted in the MA family size along with their income. Their resources are counted only in a Y case.)
M - 05	Child (used for child over 1 year of age)
M - 06	Non - responsible SR
M - 07	Minor SR
M - 08	Stepparent and member of the MA case
M - 09	Newborn child - not deemed eligible. (This code is applicable to both AFDC and MA only children, under age 1, who do not meet the MA criteria for being deemed eligible. This code will be changed to M-05 by the system when the child reaches age 1, if all technical and financial eligibility requirements are met.)
M - 11	Child of a minor SR and spouse; OR the child of the minor's spouse; OR the minor SR's child. (This code is for "C" or "W" cases only.)
M - 12	Spouse of a minor SR - included in the case only when incapacitated or unemployed and have a child (M-11) in the case. This code is for "C" or "W" cases only.)
M - 13	Sanctioned SR/QP (Qualifing Parent) in a C case or Sanctioned Qualifying Parent in a W case who receives MA only..
M - 14	Spouse (MA only eligible) of a Sanctioned Qualifying Parent with needs removed (used in a W cases only when member is MA only eligible.)
M - 15	Sanctioned child in a "C" or "W" case.
M - 16	Sanctioned Minor SR in a "C" or "W" case.
M - 17	Child of a minor SR and spouse deemed eligible; child of the minor's spouse deemed eligible; child of the minor SR only deemed eligible.
M - 18	Child of a minor SR and spouse NOT deemed eligible; child of the minor's spouse NOT deemed eligible; child of the minor SR only NOT deemed eligible.
M - 70	L child in C case (no birth verification)

NOTE: M-70 thru M-78 are usually System assigned.

M - 71	N child in W case (no birth verification)
M - 72	Y child in C case (no deprivation)
M - 73	MA only child in a W case (deemed eligible newborn)
M - 74	L child in N case (different deprivation with sibling)
M - 75	Y child in L case (no deprivation)
M - 76	C child in W case (different deprivation with sibling)
M - 77	L child in W case (different deprivation with sibling)
M - 78	MA only child in a "C" case (deemed eligible newborn)

"R" Non - member Status:

R - 40	Stepparent
R - 41	Stepparent of minor SR (used only when Minor SR is coded M-03)
R - 42	Parent of minor SR
R - 43	Spouse of Non-Responsible Specified Relative
R - 47	Refugee Second Parent living in Separate Household (Refugee program codes "RR" and "RM" only)
R - 48	Ineligible Alien parent
R - 49	Alien Sponsor
R - 50	Alien Sponsor's Spouse
R - 52	SSI Child
R - 57	Specified Relative - Not Included
R - 58	Second Parent - Not Included
R - 59	Siblings for Financial Considerations in MA only cases (regular siblings and SSI disabled which are not included as case members but are used to increase the MA family size.)
R - 60	Spouse of AFDC or AFDC/MA Child
R - 61	Unborn Child (applicable to AFDC and MA only cases)
R - 80	Sibling of a Minor Specified Relative
R - 81	Stepparent's Child
R - 82	Child of a Spouse of a Non -Responsible Specified Relative
R - 83	Child of the Spouse of the Minor Specified Relative

Program Codes U and P:

"M" Member Status:

M - 02	Deemed Eligible Newborn (P case only)
M - 05	Child
M - 09	Newborn Child (P case only)

"R" Non-member Status:

R - 40	Stepparent (P only)
R - 41	Stepparent of Minor SR (P only)
R - 42	Parent of Minor SR (U only)
R - 47	Refugee Second Parent Living in Separate Household (U only)
R - 48	Ineligible Alien Parent (U only)
R - 49	Alien Sponsor (U only)
R - 50	Alien Sponsor's Spouse (U only)
R - 57	Specified Relative -not included (U only)
R - 58	Second Parent - not included (U only)

R - 59   Siblings for Financial Considerations (U only)
(All other members would be coded as "T" Non-members.)

Program Codes J, K, M, A, B, D, AP, BP, DP, F, G, H, FP, GP, HP, and Z:

"M" Member Status:

M - 01   Adult Medical Member
M - 10   Disabled Child (does not apply to A, J, and FP cases)

"R" Non-member Status:

R - 44   Spouse of Adult Medical Member
R - 45   Parent of Disabled Child (K and M cases only)
R - 46   Child of Adult Member / Sibling of Disabled Child /
         Institutionalized Child
R - 49   Alien Sponsor

R - 50   Alien Sponsor's Spouse
R - 51   Minor Child of either Community / Institutional Spouse
R - 53   Dependent Child of either Community / Institutional
         Spouse
R - 54   Dependent Parents of either Community / Institutional
         Spouse
R - 55   Dependent Siblings of either Community / Institutional
         Spouse

IM RELATION TYPE:
Programming Note: HEKIMAOF / HRKIMDOF.

M   Maternal
P   Paternal
U   Unrelated

INCOME FREQUENCY CODES:
Programming Notes: 184 - This entity contains information about the frequency at which a person receives his income, both earned and unearned. HRKIMAOK / HRKIMDO9.

W   Weekly
B   Bi-weekly
S   Semi-monthly
M   Monthly
C   Contract

INELIGIBILITY REASON CODES (MEMBER STATUS):
Programming Note: 008 - This entity represents one of perhaps several reasons that explain why a particular case person is in a particular state, eg. a reason why a case person is determined to be ineligible to participate in a case.

701   Transfer of Resources (FS only)
702   Income Exceeds Limit
713   Work Registration
714   ETP Assessment interview (FS only)

715	ETP Requirement (FS only)
716	Comparable JOBS sanction (FS only)
718	In institution
719	Non-cooperation with QC (FS only)
723	Member Dies
724	Already Received Benefits
726	Ineligible student (FS only)
727	Ineligible alien (FS only)
728	Enumeration
729	Fraud
730	Voluntary Quit (FS only)
740	Non-member Inactive
741	Deeming income no longer appropriate (IM only)
744	Child not Deprived (IM only)
743	Non-recurring lump sum Income (IM only)
745	Child's parent not incapacitated (IM only)
746	Child's parent not unemployed (IM only)
747	Child married and living with spouse (IM only)
748	Child not living in home (IM only)
749	Not properly related to person responsible for care (IM only)
750	Age 18 and not meeting school requirements (IM only)
751	Above age limit (IM only)
752	Age 19 (IM only)
753	Does not meet the age requirement of 65 years
754	Persons on Strike (IM only)
755	Receives SSI (IM only)
757	Ineligible Member
758	Non-cooperation Statutory benefits (IM only)
761	Birth Verification (C, W cases only)
767	Unrelated person
770	Not technically eligible (IM only)
779	Child not residing in psychiatric facility
783	Third Party Liability (IM only)
789	Non-cooperation with Division of Child Support Enforcement (AFDC and AFDC Related MA only)
790	You are not Pregnant
792	Expiration of time limited eligibility
797	Intentional Program Violation (FS only)
798	Refugee Non-cooperation (IM only)
799	Member Moved Out
800	Member Inactive
801	Transfer of Resources (IM only)
806	Non-Responsible Caretaker on Strike (IM only)
808	Boarder household
809	Non-member and Separate
811	Ineligible payment status code on SDX
814	Transfer of resources (LTC /HCBS)
816	Refused to participate in JOBS (IM only)
819	Non-member and not separate
820	Entitled to Medicare Part A
821	Refused / failed to explore eligibility for SSI
822	Age ineligible for PRTF
823	Your inelig. period is still in effect

INSTITUTIONAL STATUS CODES:

AFDC Related Cases:
Programming Note: AAB

--	(Blank) Approved L, N, Y, or RM case and not in LTC
00	Approved I case, either father or mother not in the home
01	Approved I case, both parents in the home

LTC Cases:
Programming Note: AAC

M2	Type of care code equals 9 (Mental Health/Psychiatric Facility including U cases that are not PRTF)
M3	Type of care code equals 1 (Nursing Facility)
M5	Type of care code equals 8 (ICF /MR/DD)
M6	Type of care code equals 5 (AIS/MR)
M7	Type of care code equals 4 (Hospice NF)
M8	Type of care code equals 2 (HCBS)
M9	Type of care code equals 3 (Hospice non-institutionalized)
W1	Type of care code equals 6 (Model Waiver 1)
W2	Type of care code equals 7 (Model Waiver 2)
R1	Approved U case with children or individuals up to age 22 and type of care code equals 10 (PRTF)

"P"Cases':
Programming Note: AAD

01	Department for Social Services
02	Department for Human Services
03	Daviess County Welfare League
04	Fayette County Children's Bureau
05	Private non-profit institution
06	Subsidized Adoption

State Supplementation Cases:
Programming Note: AAE

P1	Type of care equals Personal Care Home
P2	Type of care equals Personal Care Home, facility number equals 010 and the member is 21 thorough 64 years of age
P4	Type of care equals Family Care Home
P5	Single individual receiving caretaker services OR a couple, one ineligible with eligible individual receiving caretaker services
P6	Eligible couple, one individual receiving caretaker services
P7	Eligible couple, both receiving caretaker services

"S" and "X" Cases:

04	Child placed in non-reimbursable placement
05	Child returns to foster care or 4E subsidized adoption
06	KY child received in another state
07	Child placed in KY from another state
08	4E Group Homes

INSURANCE COVERAGE CODES (Health Insurance):

Programming Note: 263 - This entity represents the table of all valid health insurance types that a person in an IM case may have. HRKIPA11 / HRKIPD29

A	Part A Medicare Only
B	Part B Medicare Only
C	Both Parts A and B Medicare
D	Blue Cross / Blue Shield
E	BC / BS Major Medical
F	Private Medical Insurance
G	Champus
H	Health Maintenance Organization
J	Unknown
K	Other
L	Absent Person's Insurance
M	None
N	United Mine Workers
P	Black Lung
R	Medicare Part A with member responsible for payment
S	Medicare Part A and B with member responsible for payment

INSURANCE TYPE OF ACCIDENT CODES:

Programming Note: 266 - This entity represents details about the type of accident which could lead to a settlement (countable resource) in an IM case. HRKIPAOX / HRKIPD03.

1	Employment Related
2	Automobile
3	Other

ISSUANCE CYCLE CODES:

Programming Note: 364 - This entity contains all of the possible benefit issuance cycles which could pertain to issued benefits.

AI	Aggregate Issuance
DI	Daily Issuance
FI	First Issuance
SI	Second Issuance
TI	Third Issuance

JOBS EXEMPT CODES:

Programming Note: 366 - This entity contains all of the possible jobs exempt codes. HRKIPAO2 / HRKIPD27

Worker Entered:

D	Employed 30 hours or more (unsubsidized employment)
E	Medically determined temporary illness / injury of less than 90 days.
F	Medically determined injury / illness more than 90 days.
K	JOBS county / client more than 2 hours removed
L	Participates in VISTA

System Entered:

A	Under age 16
B	Age 60 or older

C Child and full - time student
G Presence in home required to care for child or disabled adult
H 2nd trimester pregnancy
J Cares for child under 3 and caretaker is over age 19
R Inactive JOBS County

JOBS GOOD CAUSE REASON CODES FOR NOT COOPERATING:

Programming Note: 096 - This is a valid reason why the Specified Relative (SR) would claim good cause. HRKIPA02 / HRKIPD27.

DC State cannot assure "necessary" dependent care.
EC Employment conditions unreasonable
ED Employer discrimination
EX Cares for child under 6 and cannot be required to participate more than 0 hours.
HE Household emergency
HI Illness of another household member requiring presence of the participant.
HR Health reasons (mental or physical)
MA Temporary military assignment
NL Net Loss of cash income.
OE Accepted other employment that did not materialize
PR Personal reason (not good cause)
TC Travel time to work site exceeds 2 hours
TI Temporary incarceration
TR Unavailability of transportation.
WD Wages decreased after beginning employment
99 Other (not good cause)

JOBS SELF - INITIATED CODES:

Programming Note: 357 - This entity contains all of the possible instances of a JOBS target group. HRKIPA02 / HRKIPD27.

N NOT SELF - INITIATED
Y SELF - INITIATED
F SELF - Sufficiency programs (valid only in active JOBS counties when referring an individual utilizing Form PA-218)
C New Chance Demonstration Project in Fayette Co. only.

JOBS TARGET CODES:

Programming Note: 357 - This entity contains all of the possible instances of a JOBS target group. HRKIPA02 / HRKIPD27.

A Applicant received AFDC 36 of the last 60 months
B Recipient received AFDC 36 of the last 60 months
C Caretaker relative under 24 with no high school diploma or the equivalent and not currently enrolled in school
D Caretaker relative under 24 with little or no work experience in the preceding year
E Member of an AFDC case in which the youngest child is within two years of becoming ineligible
N Not targeted

KAMES MAIN MENU OPTION CODES:
Programming Note: KITN000M.

A	Application /Recertification
B	Inquiry
C	Case Change
D	Appointment Scheduling
E	Profile Selection
F	Daily Case Status Inquiry
G	Daily Case Status Additions
H	Agency Contact Entry
I	Benefit Reduction / Restoration / Supplementals
J	Help
K	History Requests
L	Review Entry
M	DSS Menu
N	Print Application / Recertification
O	Sign Off
Q	Disqualification
R	Case Reassignment
S	Child Support Interface
T	Quality Control Response
U	Location Table Inquiry and Update (suppressed)
W	CHR Interface Maintenance Menu (Suppressed)
X	PA-62 / KAMES-FS SSN Resolution
1	Help Maintenance Menu (suppressed)
2	Security Inquiry (suppressed)
3	Security Update (suppressed)
4	Annual Calendar Inquiry and Update (suppressed)
7	Eligibility Table Update (suppressed)
8	Codes Table Inquiry and Update (suppressed)

KENPAC EXEMPTION CODES:
Programming Note: AAP - HRKIPA12 / HRKIPDOB / HRKIPK22.

D   Disenrollment from present provider. A notice is generated notifying the client he / she must select another provider within 10 days or one will be assigned.

H   Hearing requested, receives general MAID card until hearing decision is reached.

I   Institutionalized individual, receives general MAID card while institutionalized.

K   KHIPP (Kentucky Health Insurance Premium Payment)

L   Lock-in participant, receives lock-in MAID card.

M   Exempt from mandatory assignment. A notice is generated notifying the client he / she will not be assigned a KenPAC provider unless he / she wants to select a provider.

LANGUAGE CODES:
Programming Note: 183 - This entity contains information about the specific language spoken by a particular person. HRKIMDOF

01   English

```
02      Vietnamese
03      French
04      Spanish
05      Iranian
06      Russian
07      Sign Language
99      Other
```

LAST JOB CODES:

Programming Note: 234 - A valid job classification for a person's last job.
HRKIPA03 / HRKIPK20

```
A       Professional / Technical
B       Manager / Administrator (except farm)
C       Sales Worker
D       Clerical Worker
E       Blue Collar Worker
F       Farmer / Farm Manager
G       Farm Laborer / Farm Foreman
H       Service Worker (Except Private Household)
I       Private Household Worker
J       Usual kind of work Varies
K       Unknown
L       Never worked outside the home / does not apply
```

LAST UPDATE REASON CODES:

Programming Note: 109 - The reason why a change has been made to a case.

System Assigned:

```
DI      Daily Issuance
FI      First Issuance
SI      Second Issuance
TI      Third Issuance
AI      Aggregate Issuance
MC      Mass Change
98      System Generated
RC      Related Case Change
SC      Special Circumstance
CO      Conversion
SD      SDX
AP      Application
RE      Recertification
PT      Program Transfer
EV      EVS Verification
EN      Enumeration Received
EM      Emergency SSI
CH      CHR Interface
```

Worker Entered:

```
MR      Monthly Reporting
CR      Client Request
IC      Interim Change
```

```
WE   Worker Error
HE   Fair Hearing
TM   TMA Quarterly Reporting (IM only)
```

LEVEL OF MISSING VERIFICATION CODES (System Applied):

Programming Note: 162 - This entity represents the table of particular reasons that a case has been declared to be in a particular case disposition status.

```
V     Mandatory Verification
O     Optional Verification
F     Application screens not completed
S     Change pending supervisor approval
N     Change pending for negative action
SPD   Pending Spenddown
R     Awaiting Recertification
H     Change pending for appealed negative action
P     Postponed verification
W     Waiting worker approval
PSO   Primary Supervisor Override
RSO   Related Case Supervisor Override
A     Address Verification
I     Missing Verification
M     Outstanding Member Match
```

LUMP SUM DEDUCTION CODES:

Programming Note: 078 - This entity describes one of several deductions or exclusions applied to the earned income of a person, for a fixed period of time. These deductions or exclusions result in a person receiving greater case benefits for a certain period of time, which serves as an incentive for them to obtain employment and therefore, improve their circumstances. HRKIMAOW / HRKIPDOE.

```
01   Verified allowable medical expenses
02   AFDC or MA standard of assistance total
03   Food Stamp allotment
04   Stepparent - Support / Alimony
05   Stepparent - Other back payments
06   Other
```

MASS CHANGE CODES:

```
T    Table Change
C    Cola Change
```

MEDICAL EXPENSE CODES:

Programming Note: 049 - This entity describes one of several specific types of expenses that may be incurred by a person. HRKIMA13 / HRKIMD12.

```
01   Medical / Dental
02   Hospital / Nursing Home
03   Prescription Drugs
04   Health Insurance (not SMI)
05   Nursing / Attend Care
```

06	Telephone Aids / TTY
07	Transportation / Lodging
08	Eyeglasses / Contacts
09	Dentures / Hearing Aids / Prosthetics
10	SMI
11	Non - household Member Expense
12	Other
13	State / Federal Taxes - Atten Care

MEMBER (Disposition) STATUS CODES:

Programmers Note: 007 - This entity describes one of a number of valid states that are applicable to a person involved in a case after disposition of the case.

A	Active
C	Countable in household size for AFDC Related MA
D	Disqualified
I	Ineligible
N	Non-member
O	Out of Household
V	Inactive
Z	Pending Member Add
P	Pending Member

MEMBER DISQUALIFY IPV SOURCE CODES:

Programming Note: 159 - This entity represents the possible sources that may establish a persons disqualification from a case because of intentional program violations.

A	Disqualification Consent Agreement
C	Court Order
H	Administrative Hearing
W	Waiver of Administrative Hearing

MEMBER (Individual) STATUS CODES:

IM Status Codes:
Programming Note: AAA - This entity describes the type of involvement of a case person with the case. HRKIMDOF / HRKIMAO4 / HRKIMDO4 / HRKIPA17 / HRKIPA16 / HRKIPA15 / HRKIPA14 / HRKIPA13 / HRKIPD13 / HRKIPD14 / HRKIPD15 / HRKIPD16 / HRKIPD17.

M	Member (eligibility determined for benefits)
T	Non-member and separate (not considered in the case)
R	Non-member but not separate (considered in test budgets)
B	Boarder / roomer

FS Status Codes:
Programming Note: 004 - This entity describes the type of involvement of a case person with a case.

M	Member
N	Not applying with elderly / disables household
S	Not applying but not separate
T	Non-member and separate all other situations

A	Boarder household #1
B	Boarder household #2
C	Boarder household #3
D	Boarder household #4
F	Foster Care / boarder - no responsible boarder payment required.

MER (Management Evaluation Review) UNIVERSE CODES:
Programming Note: 219

01	Case File
02	Ethnic
03	Normal Processing
04	Expedited service Standards
05	Exceed Expedited Service Standards
06	Joint Applications
07	Earned Income
08	Unearned Income
09	Discontinuances
10	Denials
11	Restored Lost Benefits
12	Recent Approved "C"
13	Recent Approved "W"
14	Active "C"
15	Active "W"
16	Earned Income "C"
17	Earned Income "W"
18	Unearned Income "C"
19	Unearned Income "W"
20	Recent Discontinuances "C"
21	Recent Discontinuances "W"
22	Recent Denials "C"
23	Recent Denials "W"

MONTHLY / QUARTERLY REPORT TYPES:
Programming Note: 219

F	FS MMR
P	PA MMR
T	TMA Report

MR (MONTHLY REPORT) INDICATOR:
Programming Note: HTRKIPC14 / HRKIFC05 / HRKIMD01

Y	Yes
N	No

NATIONALITY CODES:
Programming Note: 239 - A code that identifies the person's country of origin. HRKIPA08 / HRKIPDOA

01	Cambodia (Kampuchea)
02	Laos (including Hmong)
03	Vietnam
04	Soviet Union (USSR)

05   Poland
06   Other Eastern Europe
07   Cuba
08   Afghanistan
09   Iran
10   Iraq
11   Ethiopia
12   All others

NON-DELIVERABLE MAIL TYPE CODES:

Programming Note: 290 - These are the types of correspondence that were returned by the Post Office as non-deliverable.

1   Coupons or ATP card (FS only)
2   General Notices
3   Monthly Report Forms
4   Appointment Letter
5   Special Mailing
6   Claim Repayment Notice

NON-DELIVERABLE MAIL REASON CODE:

Programming Note: 321 - This is the reason a piece of mail was not deliverable. The text is 30 characters long, used for an informational message. This is a size requirement of the display screens / programs. These are the various reason codes and messages, all are in caps, and descriptions are in lower case.

A   NONEXISTENT POST OFFICE
      Addressed to a nonexistent post office.
B   NONEXISTENT ST & UNK CORR ST
      Addressed to a nonexistent street and the correct street is not known.
C   NONEXISTENT NO & UNK CORR NO.
      Addressed to a nonexistent number and the correct number is not known.
D   MISSING INFO & UNK CORR ADDR
      Mail from another post office fails to bear a number, street, box number, route number, or geographical section of the city or city and state is omitted and the correct address is not known.
E   MAIL INCOMPLETELY ADDRESSED
      Mail of local origin is incompletely addressed for distribution or delivery.
F   ADDRESS CAN NOT BE READ
      Address cannot be read.
G   MAIL IS UNDELIVERABLE
      Mail is undeliverable at address given; no change of address order on file; forwarding order has expired; forwarding postage not guaranteed by sender or addressee; or, mail bears sender's instructions DO NOT FORWARD.
H   ADDRESS IS NOT W/IN PO LIMITS
      Addressed to a location outside the limits of delivery of the post office or address (see 155.5). Mail for out-of-bounds customers must be retained in general delivery for the prescribed retention period unless addressee had filed an order.

I   NO BOX FOR RECEIPT OF MAIL
    Address has failed to provide a receptacle for the receipt of mail.

J   NO POSTAGE ON MAIL
    Mail has no postage and there are no indications that the postage has fallen off.

K   ADDRESSEE MOVED-NO CHG. OF ADD
    Addressee has moved and has not filed a change of address order.

L   PERIOD FOR HOLDING MAIL-EXP
    Addressee is temporarily away and retention period for holding mail has expired.

M   ADDRESSEE NOT KNOWN AT ADD
    Delivery attempted, addressee is not known at the place of address.

N   ADDRESS HAS REFUSED MAIL
    Addressee has refused to accept mail or pay postage charges thereon.

O   ADDRESS NOT OCCUPIED
    House, apartment, office or building is not occupied. Use only on mail addressed Occupant.

P   POBOX HAS BEEN CLOSED-NONPYMT
    Post Office box has been closed for non-payment of rent.

Q   MAIL RETURNED TO SENDER
    Mail is returned to sender under a false representation order.

R   ADDRESSEE FAILS TO P/U MAIL
    Addressee abandons or fails to call for mail.

S   NO ONE CAN REC MAIL ADDEE
    Used only when it is known that the addressee is deceased and the mail is not properly deliverable to another person. This endorsement must be made personally by the delivering employee and under no circumstances may it be rubber-stamped. Mail addressed in care of another will be marked to indicate which person is deceased.

T   MAIL RETD TO SENDER-LOTTERY
    Mail is returned to sender under a lottery order.

U   MAIL RETD TO SENDER-REGL COUNL
    Mail is returned to sender by order of the Regional Counsel when it cannot be determined which of disputing parties has better right to the mail.

V   ADDRESSEE IS DECEASED
    Deceased

PA MMR INCOMPLETE REASON CODES:

Programming Note: 122 - This entity holds the MMR incomplete reason codes which could be applied to a case. HRKIPD32.

01I   Question 01 was incomplete.
02I   Question 02 was incomplete.
03I   Question 03 was incomplete.
04I   Question 04 was incomplete.
05I   Question 05 was incomplete.
06I   Question 06 was incomplete.
07I   Question 07 was incomplete.
08I   Question 08 was incomplete.

09I	Question 09 was incomplete.
10I	Question 10 was incomplete.
11I	Question 11 was incomplete.
04V	Statement from any person outside your household who gave you money to pay any part of your rent or mortgage and/or utility bills during the report month.
08V	Income from employment.
09V	Dependent care expenses.
10V	Unearned income that has changed or is new.
11V	Bank statement or other records to verify your checking account, savings account and/or any other liquid resources.
12V	Verify child or spousal support.
ACV	Alien status or citizenship for new household members.
SNV	Social Security number for new household members.
STV	Statement from an institution of higher education verifying enrollment or at least half-time enrollment and/or receipt of work-study.
OIV	Other information is needed in order to process your monthly report. Please contact your caseworker immediately.
DTM	Your monthly report form must be dated.
SGM	Your monthly report form must be signed.

PAYMENT TYPE CODES:

CODE	DESCRIPTION	CATEGORY
1	Regular	FS & IM
2	Type W ID (SPL CIR) Grant	IM
3	Type No ID (SPL CIR) Medical only	IM
4	Restoration	FS
5	Replacement	FS
6	Supplemental	FS & IM
7	Retro Payment	IM
8	Lockin (Grant)	IM
9	Lockin ID Only (MA)	IM
0	Pro-rated	FS & IM

PENDING CASE REASON CODES:

Programming Note: These codes will indicate the reason a CASE is pending.

A	Address verification
F	Incomplete application
H	Appealed negative action
I	Missing Information
M	Outstanding member match
N	Negative action period
O	Missing optional info
P	Postponed verification
PSO	PRIM supervisor override
R	Awaiting recertification
RSO	REL supervisor override
S	Supervisor approval
SPD	Pending spenddown
V	Missing mandatory info
W	Waiting worker approval

PENSION CODES:
Programming Note: 356 - This entity contains all of the possible instances of pension types. HRKIMAOR / HRKIMD09.

01	Military
02	Federal Civil Service Commission
03	State or Local Government or Private
04	KEOGH / IRA
05	Insurance

PROFILE SELECTION CODES:
Programming Note: This entity contains all of the possible standard case review profiles available to a supervisor for profile matching. (FS-293; IM-AAG).

FS Cases:

01	Gross earned income is greater than 0 and, gross unearned income is greater than 0 and total shelter greater than 0 and utility standard applied.
02	Earned Income.
03	Earned Income with Weekly Wages.
04	Earned Income with Shelter deductions.
05	Unearned Income with SSI and RSDI.
06	Unearned Income with RR, VA and Black Lung.
07	Unearned Income with Child Support.
08	No Income.
09	Medical Deductions.
99	No profile desired.

IM Cases: Note - Household members greater than or equal to 4 with earned income greater than or equal to $200 and coupon allotment greater than or equal to $151 (default profile for FS).

01	Earned Income Profile (default Profile).
02	Earned Income with Weekly Wages.
03	Cases with Unearned Income.
04	Unearned Income with Child Support.
05	Unearned Income with RSDI.
06	Cases with Unearned Income.
07	LTC Cases with Unearned Income.
08	Cases with MA Only Children.
99	No Profile Desired.

PROGRAM CODES:
Programming Note: AAU.

C	AFDC money payment.
W	AFDC Unemployed Parent money payment.
L	AFDC related MA with deprivation factor.
N	AFDC related MA with deprivation of unemployment.
P	AFDC related MA for children in foster care.

U	AFDC related MA for children in psychiatric hospital or PRTF.
Y	AFDC related MA limited to pregnant women and children.
I	AFDC related MA limited to pregnant women and children with enhanced income limits.

X	DSS administered MA for children.
S	DSS administered MA for children.

A	SSI and SSI/LTC.
B	SSI and SSI/LTC.
D	SSI and SSI/LTC.

F	Pass Through (aged).
G	Pass Through (blind).
H	Pass Through (disabled).

J	Adult MA (aged).
K	Adult MA (blind).
M	Adult MA (disabled).

Z	QMB or QDWI.

AP	SSI / State Supplementation (aged).
BP	SSI / State Supplementation (blind).
DP	SSI / State Supplementation (disabled).
FP	State Supplementation (aged).
GP	State Supplementation (blind).
HP	State Supplementation (disabled).

DE	DEFRA Check writing

BC	MSE on SSI child (blind).
DC	MSE on SSI child (disabled).

PROGRAM TYPE CODES:

Programming Note: 015 - used at application and recertifications. HRKIMU52.

FS	Food Stamp application only
IM	Income Maintenance application only
JT	Joint (Food Stamp and IM) application .

PROPERTY SOLD CODES:

Programming Note: 267 - This entity contains the table of all valid codes of the types of property sold which may be considered as a resource in an IM case. HRKIPAOY / HRKIMD15.

H	Home
N	Non-homestead

PROVIDER SPECIALTY CODES (KenPAC):
Programming Note: 320.

01	General Practitioner
09	Osteopath
11	Internal Medicine
16	OB / GYN
25	Family Practitioner
37	Pediatrician

QUALITY CONTROL RESPONSE CODES:
Programming Note: ABQ

First Digit:

0	No claim established
1	Claim established

Second Digit:

1	Error corrected prior to receipt of 343
2	Case discontinued as a result of review
3	Overpayment corrected for next issuance
4	Underpayment corrected for next issuance

QUALITY CONTROL UNIVERSE CODES:
Programming Note: 221

01	FS New Approval
02	FS Negative
03	FS Ongoing
04	FS Supplemental
05	AFDC New Approval
06	AFDC Negative
07	AFDC Ongoing
08	AFDC Supplemental
09	MA New Approval
10	MA Negative
11	MA Ongoing

QUIT JOB CODES:
Programming Note: This is a valid reason why the Specified Relative (SR) would claim good cause. Work Registration - AAY: For JOBS participants - AAK. HRKIPAOS / HRKIMDOK / HRKIMDOE / HRKIFA07.

For Work Registration:
Programming Note: AAY.

NP	Not primary wage earner (FS only)
DL	Didn't like job (not good cause)
EC	Employment conditions unreasonable
ED	Employer discrimination
EU	Employment became unsuitable
FI	Fired
HR	Health (mental or physical) reasons

NO	Connected with normal pattern of employment
OE	Accepted other employment, training
PL	Pay too low
PR	Personal reason (not good cause)
RR	Resignation accepted as retirement
99	Other (not good cause)
PD	Voluntary Quit date greater than 60 days prior to application
CQ	Cured quit
DS	Position vacant due to strike, lockout or labor dispute (refugee only)
UR	Working conditions contrary to union regulations (refugee only)
TC	No way to go to work or commuting time more than 2/3 hours per day
HS	Working conditions risk client's health or safety
TI	Training position inappropriate (refugee only)
RS	Re-application sanction (not good cause in FS)
BF	Bona fide offer of employment NOT made at minimum wage customary for such work in the community (IM and refugee only)

For JOBS Participants:
Programming Note: AAK.

DC	State cannot assure "necessary" dependent care.
HR	Health reasons (mental or physical)
TR	Unavailability of transportation
TC	Travel time to work site exceeds 2 hours
HI	Illness of another household member requiring presence of the participant
TI	Temporary incarceration
ED	Employer discrimination
EC	Employment conditions unreasonable
WD	Wages decreased after beginning employment
OE	Accepted other employment that did not materialize
PR	Personal reason (not good cause)
99	Other (not good cause)

RACE CODES:
Programming Note: 180 - This entity represents a persons race or ethnic group. HRKIMAOF / HRKIDOF.

04	White
05	Black
06	Asian
07	Hispanic
08	American Indian, Alaskan
09	Unknown
99	Refused to answer

REASON FOR DCSE GOOD CAUSE CLAIM DECISION:
Programming Note: 260 - This is a valid reason for a decision on a good cause claim. HRKIPAOP / HRKIPD21.

01	No corroborative evidence, Agency Investigation
02	Corroborative evidence, No agency investigation

03 Corroborative evidence and agency investigation
09 Inapp: GC does not exist, claim not filed, claim withdrawn or AFDC case denied.

REASON FOR FILING DCSE GOOD CAUSE CLAIM:

Programming Note: 258 - This is the type of refusal a case person is making in regards to a DCSE activity. HRKIPAOP / HRKIPD21

1 Physical harm to child
2 Emotional harm to child
3 Physical harm to SR
4 Emotional harm to SR
5 Rape or incest
6 Adoption in process
7 Being assisted in decision on adoption
8 Good cause does not exist
9 Inapplicable; No claim filed
0 Inapplicable; Claim withdrawn or AFDC case denied

RECIPIENT STATUS CODES:

Adult MA (J, K, M) cases:

Programming Note: AAV. For approved J, K, M, cases and the LTC indicator is set.

01 The gross income is greater than the special income standard or the admission date is less than 30 full consecutive days.
07 The gross income is less than or equal to the special income standard and the admission in LTC is greater than or equal to 30 full consecutive days.

Adult MA (A, B, D - SSI Cases):

00 Regular active SSI case
03 Emergency SSI approval, time limited
04 Emergency SSI approval, ongoing
06 Active SSI case with Zebley indicator is set

AFDC / AFDC-UP Cases:

Programming Note: AAX.

Ist digit:
0 No MMR required
1 MMR required

2nd digit:
1 Grant amount less than $10
2 Reinstatement and claim indicator is set
3 Regular AFDC
4 Suspense

I Case:
Programming Note: AAW

P1   Eligible and P cases at 100% poverty level
P2   Eligible and P cases at 133% poverty level
P3   Eligible and P cases at 185% poverty level

U Case:
Programming Note: ABB.

55   Approved case and the child is in DSS custody and "X" case was discontinued due to admission to a psychiatric facility.
03   All other U approved cases.

State Supplementation Cases:
Programming Note: ABA.

02   Optional
BB   Optional case and QMB indicator is set

Z Cases (QMB indicator is set):
Programming Note: ABC.

01   QMB indicator is set and recipient's age is greater than 64
02   QMB indicator is set and recipient's age is less than 65
03   QDWI indicator is set

QMB indicator is not set:
Programming Note: AAZ.

02   Approved spenddown case or:discontinued case and eligible for alien time-limited (4 mo)
03   Approved AFDC / MA or approved J, K, M case and the LTC indicator is not set (don't overlay P1, P2, P3)
05   Approved F, G, H, case
07   Discontinued AFDC case and not receiving TMA
08   Active BC or DC case
09   Active A, B, D, case and the LTC indicator is set

Dual eligibility Case (QMB indicator is set and not processing a "Z" case):
Programming Note: ABD.

AA   Approved J, K, M case and the LTC indicator is on and admission in LTC is less than 30 full consecutive days
CC   Approved AFDC / MA case or an approved J, K, M case and not in LTC
EE   Approved F, G, H case
GG   Approved J, K, M case when LTC indicator is on and gross income is less than or equal to the special income standard and admission in LTC is greater than or equal to 30 full consecutive days.

REFUGEE COOPERATION GOOD CAUSE CODES:

Programming Note: AAL - This is a valid reason why the Specified Relative (SR) would claim good cause when a refugee.

BF   Bona fide offer of employment NOT made at minimum wage customary for such work in the community.
HR   Health (mental or physical) reasons
TC   No way to go to work or commuting time more than 2 hours per day
HS   Working conditions risk client's health or safety
NO   Leaving a job not contested with normal pattern of employment
DS   Position vacant due to strike, lockout or labor dispute
UR   Working conditions contrary to union regulations
ED   Employer discrimination
TI   Training position inappropriate
99   Other (not good cause)

RELATIONSHIP TO APPLICANT CODES:

Programming Note: 005 - This entity describes the relationship between a member or non-member case person and the case applicant. HRKIMAOE / HKIMDOE.

01   Self
02   Parent
03   Spouse
04   Sibling
05   Child
06   Unrelated Adult
07   Unrelated Child
08   Grandson
09   Granddaughter
10   Stepson
11   Stepdaughter
12   Stepbrother
13   Stepsister
14   Nephew
15   Niece
16   Uncle
17   Aunt
18   First Cousin
19   Other Relative

RELATIONSHIP TO POLICY HOLDER CODES (IM-TPL):

Programming Note: 287 - This entity represents the table of all valid relationships that a person could have to a 3rd party health insurance provider policy holder. HRKIPA11 / HRKIPD29.

1   Self
2   Spouse
3   Child
4   Stepchild
5   Other

REPLACEMENT REASONS:
Programming Note: 112 - Reasons why a benefit has been issued or replaced. HRKIFI03.

R01	Non-receipt of ATP / coupons
R04	Casualty Loss
R05	FNS Declared Disaster
R06	Returned by US Postal Service
R07	Insufficient Issuance
R08	Moved Between Counties
R09	Replacement of R08

RESOURCE CODES:
Programming Note: 051 - This entity describes one of several types of resource that may be possessed by persons involved in cases. HRKIMAOY / HRKIMD14.

DE	Deemed from excluded members
DS	Deemed to sponsored aliens
FC	Foster Care
IM	Resource FMV - countable in IM only (!M only) (Refer to FS significant return policy)
IP	Interest payments or dividends
MA	Military allotment
OL	Oil leases or mineral rights
RE	Rental
PS	Pending Settlement
99	Other

RESTORATION CODES:
Programming Note: AAM - Reasons why a benefit has been issued or replaced.

RS1	Agency Error
RS2	Reverse Adm. Disqualification Hearing
RS3	Joint Processing at SSA

ROOMER / BOARDER EATING CODES:
Programming Note: HRKIFA02 / HRKIFDOE.

0	No meals
1	One meal
2	Two meals
3	Three meals

ROOMER / BOARDER INCOME CODES (IM ONLY):
Programming Note: 235 - A valid roomer/boarder income source. HRTKIPA04 / HRKIPDOC.

1	Roomer
2	Boarder
3	Roomer / boarder

SECURITY USER GROUP CODES:

Programming Note: 167 - This entity represents the table of all possible security access classes and functions related to each particular class. HRKIMS02.

01	Caseworker
02	Supervisor
03	Claim worker
04	Claims Unit Supervisor
05	Receptionist
06	KAMES Project staff
07	QC personnel
08	Hearing Officers
09	Clerk
10	MER officers
11	Operation Support staff
12	Area Managers
13	Regional Administrators
14	IN
15	Floater
16	Probationary worker
17	Eligibility Services Staff
18	Director
19	Commissioner
20	Regional Office Staff
21	Security Administrator
22	Claim floater
23	Claim Principal worker
24	Principal worker
25	DSS personnel
26	Fiscal Services staff

SELF EMPLOYMENT / INCOME CODES:

Programming Note: 115. HRKIMD03 / HRKIMAOA / HRKIMAOB.

S	Self-employment
R	Rental
U	Unearned
E	Earned

SEX CODES:

Programming Note: ABE - HRKIMAO4

M	Male
F	Female
U	Unknown (for unborn children only)

SPECIAL INTERVIEW CODES:

Programming Note: 099 - Source that indicates special considerations are required for a client for an appointment. HRKIPC14 / HRKIMD01 / HRKIFC05.

DI	Disabled
HV	Home Visit
IL	Illiterate

PI   Phone Interview
TP   Third Party
IN   Interpreter Needed
HP   Hospital Interview
DF   Signing for the deaf

SPOT CHECK CODES:

Programmer Note: All categories under "SPOT CHECK" have various reason codes and messages which are in upper case. The descriptions, if appropriate, are in lower case.

System Assigned Codes:

CD   MSE NON-COOPERATION SSI CHILD
QB   ELIG MEDICARE / DISC PASS THRU
E1   EVS VERIF-SSN NOT ON SSA FILE
         EVS verification - SSN not on SSA enumeration / numident files
E2   EVS VERIF-NO MATCH SEX CODE
         EVS verification - name and dob match, sex doesn't
E3   EVS VERIF - NO MATCH DOB
         EVS verification - name and sex codes match, dob doesn't
E4   EVS VERIF - NO MATCH DOB & SEX
         EVS verification - name matches, dob and sex code doesn't
E5   EVS VERIF - NO MATCH NAME
         EVS Verification - name doesn't match, dob and sex code not checked

ETP (From DES):

9E   DISQUAL ENDED - DO MEMBER ADD
9P   ENTER 314 DISQUAL ON DUE DATE
9Q   ENTER 315 DISQUAL ON DUE DATE
9R   MEM STARTED WORK-SEND PAFS 2
9S   ENROLLED HIGHER ED - SEND PAFS 2
9T   MEM STARTED OJT - SEND PAFS 2
9Y   ADDRESS CHG REPORTED TO DES
WC   SSN CHANGE REPORTED TO DES
WD   MBR W/CHILD UNDER 6 PER DES
WE   MEMBER NOW DISABLED PER DES
WF   HH COMPOSITION CHANGE PER DES
WH   RETURNED MAIL PER DES
WI   REFUSED JOB OFFER PER DES
WJ   CASE DISC-RESTORATION REMAINS
WK   DISQUAL CURED - DELETE 314/315
WL   ENTER ETP VOL DATE
WX   DELETE ETP VOL DATE
W4   ET CONCILIATION MET - DISQ N/A
W6   DISQUALIFY FOR 314 IMMEDIATELY
W7   DISQUALIFY FOR 315 IMMEDIATELY
W8   DELETE ET DISQUAL-REINSTATE

JOBS (From JAS):

WN	COMP REF PENDING 15 / 60 DAYS
WO	REVIEW GOOD CAUSE
WP	SANCTION - REMOVE MBR FROM AFDC
WQ	CURE BEG DATE / NO CURE END DATE
WR	PROJD COMPLT DATE OVER 30 DAYS
WS	REVIEW SUPPORT SERV REF SCREEN
WT	REVIEW EDP ACTIVITY
WU	REVIEW COMP REJECT REASON
WV	COMP COMPT - NO REFERRAL
WY	REVIEW DES SCREENS
W0	REVIEW DES ADDITIONAL COMMENTS
W2	WRK REG / NONCOMP JOBS COMPONENT
W3	REVIEW DES COMMENTS
W5	DISQUALIFY FOR REASON 316
W9	DELETE 316 DISQUAL OR WORK REGISTRATION
XA	ENTER 316 DISQUAL - OJT
XB	ENTER 316 DISQUAL - JST
XC	ENTER 316 DISQUAL - CCO
XD	REVIEW PIC COMMENTS(effective January 1, 1994)
XE	REVIEW PIC SCREENS (effective January 1, 1994)
XF	DISQUAL CURED - DELETE 316

Other IM only (System Generated):

AA	AGENCY ACTION
AN	ATTENTION NEEDED SSI APPROVED
B	UNEARNED INCOME CHANGE
BA	ANTICIP BIRTH - CONTACT CLIENT
	Anticipated birth of child
BC	BC / DC CHANGED TO B / D > 18 YEARS
BP	END OF POST PARTUM - REVIEW CASE
	End of post partum period
BV	OUT OF STATE BIRTH VERIFICATION
CD	MSE NON-COOPERATION SSI CHILD
CJ	VERIFY CHILD SUP SENT TO DCSE
	AFDC case with child support in the budget
CK	SS-5 GOOD CAUSE DATE
CX	CHANGE EXTRACTION CODE
C1	IST BIRTHDAY NXT MTH - I CASE
	Review case child turns 1 year old
C3	3RD BIRTHDAY NXT MTH - JOBS
	Child turns 3
C6	6TH BIRTHDAY NXT MTH - 1 CASE
	Removal of 6 year old in 1 case
DE	DEFRA COULD NOT BE APPLIED
DF	FORCED SEP ENDED, CHANGE DEP
DI	DESERTION CONTACT CLIENT
	Recent desertion
DR	REVIEW ABSENCE -RECENT DESERTION
	Recent desertion in last 6 months
HS	END HOME EXCL - REV RESOURCES
	End of exclusion for sale of home
I1	TCC / TMA DISCONTINUEANCE

```
KP      PROVIDER DISENROLLED / SELECT PROVIDER
LM      PRTF - BED RESERVATION EXPIRED
LP      VERIF OF PRIVATE PAY OR VA
            LTC case with 100% private pay or VA contract
LS      CHECK FOR SSI DISCONTINUANCE
            SSI / SSP individual in LTC facility for 3 months
04      CHILD TURNING 18 YEARS OLD
            Child turning 18 years old
MR      MRT REDET DUE NEXT MONTH
            MRT redetermination
PE      END NON - HOME EXCL - REV RESOURCES
            Non - home property exclusion
PR      RELEASE OF A / P - REV DEP
            Release of absent parent
PT      PROPERTY TRANSFER VERIFICATION
QA      QMB APPROVED / REVIEW FS MED EXP
RC      CASE CHNGE-REVIEW CASE
RJ      INITIATE JOB SEARCH
RS      RESOURCES ACCESSIBLE
            Available resources
R9      18 YEAR OLD GRADUATES - MEM DEL
SA      SETTLEMENT EXPECTED
SF      FORCED SEP - CONTACT CLIENT
            Forced separation
SS      SSN CHG BY WORKER / RELATED CASE
TB      CASE TRANSFERRED IN
UE      DEP UNEMP - 30 DAY EXPIRED
            Unemployment
UI      UNEARNED INCOME CHGE PER SDX
W1      REVIEW PENDING AFDC QUESTION
DF      FORCED SEPARATION ENDED, CHANGE DEP.
EX      EXCLUDED STUDENT INCOME EXP
```

Worker Entered:

Programming Note: . The "reason" (ABL) is entered by the worker on the disposition screen HRKIMC09 in the field "REASON". This will initiate the display of the Spot Check message as indicated.

Reason	Spot Check Message
A	EARNED INCOME CHANGE
B	UNEARNED INCOME CHANGE
C	RESOURCE CHANGE
D	MEDICAL DEDUCTION CHANGE
E	DEPENDENT CARE CHANGE
F	SHELTER SEGMENT CHANGE
G	MEMBER ADD / DELETE
H	MEMBER HISTORY MOVED TO NEW CASE
I	TECH ELIGIBILITY FACTOR CHANGE
J	ADDRESS CHANGE
K	AGE TRACKING
L	WORK REGISTRATION
M	DRUG / ALCOHOL OR GRP LVNG ARR
N	628 NOT REQUIRED

```
O          Other
P          APPROVAL
Q          EXPIRING EXTRACTION
R          DENIAL / DISCONTINUANCE
S          INSTALLMENT MEDICAL
T          SS5 GOOD CAUSE HEARING
```

SPOT CHECK "REASON" CODES:

Programming Note: 322 - These are the various system generated spot checks generated for worker review.

9C   CASE DISCONTINUED - ACTIVE CLAIM
            Discontinued Case with active claim
CK   SS-5 GOOD CAUSE DATE
            Expiring good cause
CX   CHANGE EXTRACTION CODE
            Change extraction code
9D   DO CASE CHG - EXP W / ANTIC CHG
            Expedited case with anticipated change
9O   HOH CHG - REVIEW MBR RELATIONSHIP
            Change in head of household
4A   SPOT CK - GROUP LIVING ARRGNMET
            Household in group home
PT   BANK / COURTHOUSE ASSET CHECK
            Verify property transfer
O5   60TH BIRTHDAY NEXT MONTH
            Member turns age 60
3A   EXPIRING MEDICAL EXPENSES
            Expiring installment medical expense
RC   CASE CHNGE - REVIEW CASE
            Case change - review related case
SA   SETTLEMENT EXPECTED
            Settlement expected as a result of an accident or workman's
            compensation claim
TC   CASE TRANSFERRED IN - DO REASSIGN
            Case transfer to a supervisor
2A   WORK REGISTRATION EXPIRING
            Expiring work registration
8C   ONE TIME DEDUCT - MED OR SHELT
TB   CASE TRANSFERRED IN
            Case transferred to a worker
TD   RESIDES OUT OF CTY REVIEW CASE
            Client lives out of County
TE   CASE NON-MMR, ADJ INC AS NEEDED

SSI APPLICATION STATUS CODES:

Programming Note: 255 - This is a possible status of a person's application for SSI. HRKIPAOH / HKRIPD08.

04   Never applied
05   Pending application
06   Denied - appeal status
07   Denied - no appeal

SSI DISCONTINUANCE REASON CODES:

Programming Note: 254 - This is a reason why a person's SSI might have been discontinued. This reason is used in the field determination of incapacity or disability. HRKIPAOH / HRKIPDO8

01	Financial Ineligibility
02	No longer blind or disabled
03	Other
04	Death of recipient

STATE CODE LIST:

Programming Note: A list of valid abbreviation for all States:

AL	Alabama
AK	Alaska
AZ	Arizona
AR	Arkansas
CA	California
CO	Colorado
CT	Connecticut
DE	Delaware
DC	District of Columbia
FL	Florida
HI	Hawaii
ID	Idaho
Il	Illinois
IN	Indiana
IA	Iowa
KS	Kansas
KY	Kentucky
LA	Louisiana
ME	Maine
MD	Maryland
MA	Massachusetts
MI	Michigan
MN	Minnesota
MS	Mississippi
MO	Missouri
MT	Montana
NE	Nebraska
NV	Nevada
NH	New Hampshire
NJ	New Jersey
NM	New Mexico
NY	New York
NC	North Carolina
ND	North Dakota
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
RI	Rhode Island
SC	South Carolina
SD	South Dakota

TN	Tennessee
VA	Virginia
WV	West Virginia
TX	Texas
UT	Utah
VT	Vermont
WA	Washington
WI	Wisconsin
WY	Wyoming

STATE SUPPLEMENTATION CATEGORY Codes:
Programming Note: 242 - HRKIPAO9

F	Facility
C	Caretaker
N	Services no longer needed

STRIKER CODES:
Programming Note: ABM - HRKIMDOE

E	Eligible
I	Ineligible

STUDENT ENROLLMENT CODES:
Programming Note: ABN - HRKIPAOT / HRKIPDOF

01	Full Time
02	Part Time

SUPERVISORY APPROVAL REASON CODES:
Programming Note: ABO.

P	Probationary Worker
I	Insufficient Wage Verification
U	Client Stated Unearned Income
C	Agency Contact Discrepancy
S	Changed Verified SSN
A	Recertification Address Change
E	Certification End Date Change
B	Back Dating Application

SUPPLEMENTAL ISSUANCE CODES:
Programming Note: AAN - Reason why a supplemental benefit has been issued or replaced.

Worker Generated:
SP1	An agency error caused an underpayment
SP2	Increase in household members
SP3	$50 or more decrease in gross income (FS only)
SP4	Income considered in the first two prospective months was more than actual income (IM only)
SP7	Underpayment for a prior month

System Generated:
SP5   System applied increase in household members
SP6   System applied $50 or more decrease in gross income

TMA INCOMPLETE REASON CODES:
Programming Note: AAO - This entity holds the TMA incomplete reason codes which could be applied to a case. HRKIPD1D.

011   Question 1 was incomplete.
021   Question 2 was incomplete.
031   Question 3 was incomplete.
041   Question 4 was incomplete.
08V   Income from employment.
09V   Dependent care expenses.
ACV   Alien status or citizenship for new household members.
SNV   Social Security Number for new household members.
OIV   Other information is needed in order to process your report. Please contact your caseworker immediately.
DTM   Your report must be dated.
SGM   Your report must be signed.

TMA GOOD CAUSE REASON CODES:
Programming Note: ABP -

1   SR is out - of - town for the entire filing period.
2   An immediate family member is institutionalized or died during the reporting period.
3   Assistance group was the victim of a natural disaster.
4   Assistance group moved and reported timely, but the move resulted in a delay in receiving or failing to receive the report form.
5   Agency error.
6   No good cause exists.

TYPE OF CARE (LTC Cases) CODES:
PROGRAMMING NOTE: 247 - A type of Long Term Care for a particular client. HRKIPAOB / HRKIPD22 / HRKIPAOD.

1   NF (Nursing Facility)
2   HCBS
3   Hospice / Non - Institutionalized
4   Hospice
5   AIS / MR
6   Model Waiver I
7   Model Waiver II
8   ICF / MR / DD
9   Mental Health / Psychiatric Facility
10   Psychiatric Residential Treatment Facilities
11   Adult Day Care
12   IMD

UNEARNED INCOME CODES:
Programming Note: 045 - This entity describes one of several sources of unearned income that a person may possess. HRKIMDO9.

A	PA
B	SSI
C	UI
D	DEFRA
E	SSA (RSDI)
F	VA
J	Black Lung
K	Railroad Retirement
L	Worker's Compensation
M	Military Pension
N	Federal Pension
O	Government / Private Pension
P	IRA / KEOGH Pension
Q	Insurance Pension
R	Child Support
S	Friend / Relative
T	Others
U	Other PA
V	Alimony
Z	Escrow Check

UNTIMELY REASON CODES (Worker):
Programming Note: 186 - This entity holds information about why a person who contacted the agency was not seen in a timely manner.

1	Walk - in
2	Other interview
3	Meetings
4	Uncovered work
5	Worker not notified
6	Worker fault
7	Client absence
8	Other

UTILITY EXPENSE CODES:
Programming Note: 030 - All the categories of expenses that can be related to a particular case expense type. This is the method of counting the expense. HRKIFA03 / HRKIFD01.

D	Deduct utility expense - one month only
--	(Blank) Average over the period of use and deduct average monthly.

VERIFICATION CODES:
Programming Note: 090 - This entity is used to indicate how a specific client statement was verified.

BX	Bendex
CC	Collateral Contact
CE	Categorical Eligibility (FS only)

CS	Client Statement
NA	Verification not applicable
NB	NADA Book
OR	Original Record
PR	Personal Records
PV	Previously verified / change of $25 or less and source has not changed (not for shelter expenses)
OV	Override
RE	Receipts, Bills, Contracts, Leases, Award Letters, Payment Books.
SA	System Applied
SM	System Match
TR	Tax Returns
WM	Worker Match
WS	Written statement
98	System processed action
99	Other